

NEW HOSPITAL DEATH REPORTING REQUIREMENTS

The Patients' Rights, Interim Final Rule, published July 2, 1999, requires at 42 CFR 482.13(f)(7) that a hospital must report to their Centers for Medicare and Medicaid (CMS) Regional Office any patient death that occurs while the patient is restrained or in seclusion for behavior management; e.g., for violent behavior toward self or others.

The Final Rule was published December 8, 2006 and states:

The hospital must report the following information to CMS:

- (i) Each death that occurs while a patient is in restraint or seclusion.
- (ii) Each death that occurs within 24 hours after the patient has been removed from restraint or seclusion.
- (iii) Each death known to the hospital that occurs within 1 week after restraint or seclusion where it is reasonable to assume that use of restraint or placement in seclusion contributed directly or indirectly to a patient's death.

This publication expands on the previous reporting criteria, in that any restraints (medical surgical, post-operative, etc.) are now included in reporting considerations.

The deaths must be reported to the Regional Office **prior to the close of business on the business day following the day of the patient's death**. The CMS Regional Office contact is Mai Le-Yuen. Her number is 312-353-2853.

Please call the Division of Licensing & Certification, Bureau of Health Systems, MDCH, at 517-241-4160 if you have additional questions.